PTO/SB/05 (06-03)
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	Attorn	Attorney Docket No. 20402-00639-US2						
UTILITY		ventor Kinya Hasegawa						
PATENT APPLICATION TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	Title	NONINVASIVE CONTINUOUS BLOOD MEASURING APPARATUS AND A METHOD OF NONINVASIVELY MEASURING CONTINUOUS BLOOD PRESSURE						
, , , , , , , , , , , , , , , , , , ,	Expre	s Mail Label No.						
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application co	ontents.	MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450						
(preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix	4 1	7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies						
Background of the Invention Brief Summary of the Invention	İ	ACCOMPANYING APPLICATIONS PARTS						
- Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure		9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of Attorney						
4. X Drawing(s) (35 U.S.C. 113) [Total Sheets	17]	11. English Translation Document (if applicable)						
<u> </u>	2 1	12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations						
a. Newly executed (original or copy) b. X Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).		13. X Preliminary Amendment 14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. Other:						
6. X Application Data Sheet. See 37 CFR 1.76								
following the title, or in an Application Data Sheet under 37 CF Continuation X Divisional Continuation Prior application information: Examiner For CONTINUATION or DIVISIONAL APPS only: The entire	R 1.76: n-in-part (0 Nasser disclosure nying conti	Art Unit: 3736 Te of the prior application, from which an oath or declaration is supplied under tinuation or divisional application and is hereby incorporated by reference.						
		ONDENCE ADDRESS						
X Customer Number:	3	OR Correspondence address below						
Name -								
Address								
City Sta	ate	Zip Code						
Country Te	lephone	Fax						
Name (Print/Type) 14 Morris Liss		Registration No. (Attorne v/Agent) 24 510						

Ther B. Nielson Reg. No. 45,528

Signature

Date

November 26, 2003

			Complete if Known							
FEE TRANSMITTAL			Application Number				Not Yet Assigned			
for EV 2004			Filing Date			Concurrently Herewith				
for FY 2004			First Named Inventor				Kinya Hasegawa			
Effective 10/01/2003, Patent fees are subject to annual revision.		Examiner Name				Not Yet Assigned				
Applicant claims small entity status. See 37 CFR 1.27	Art Unit				N/A					
TOTAL AMOUNT OF PAYMENT (\$) 770.00		Attorney Docket No. 20402-00639-US2								
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)								
Credit Money										
Check Card Order Other None	3. ADDITIONAL FEES									
X Depos it Account:	Large Entity Small Entity									
Deposit Account 22-0185	Fee	Fee	Fee	Fee	•	Fee Desc	rintion			
Number	Code	(\$)	Code	(\$)		100 0030	po.ii	Fee Paid		
Deposit Account Connolly Bove Lodge & Hutz LLP	1051	130	2051	65	Surcharge -	 late filing fe 	e or oath			
Name The Director is authorized to: (check all that apply)	1052	50	2052	25	Surcharge sheet.	- late provision	onal filing fee or cover	1		
X Charge fee(s) indicated below X Cred it any overpayments	1053	130	1053	130		h specificatio	n			
Charge any additional fee(s) during the pendency of this	1812	2,520	1812		_		oarte reexamination	 		
application	1804	920*	1804	920*	-	publication o		}		
Charge fee(s) indicated below, except for the filing fee			ĺ		Examiner a	iction publication o	of SIR after	ļ		
to the above-identified deposit account.	1805	1,840*	1805		Examiner a	iction				
FEE CALCULATION	1251 1252	110 420	2251	55 210		or reply withir				
1. BASIC FILING FEE Large Entity Small Entity	1252	950	2252	475		or reply within	n second month			
Fee Fee Fee Fee Fee Description Fee Paid	1254	1,480	2254	740			n fourth month			
Code (\$) Code (\$) 1001 770 2001 385 Utility filing fee 770.00	1255	2,010	2255							
1001 770 2001 385 Utility filing fee	1401	330	2401	165	Notice of A	or reply withir pneal	·			
1003 530 2003 265 Plant filing fee	1402	330	2402	165		of in support c	of an appeal			
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	•	r oral hearing				
1005 160 2005 80 Provisional filing fee	1451	1,510	1451		•	•	lic use proceeding	<u> </u>		
	1452	110	2452	55		evive – unav				
SUBTOTAL (1) (\$) 770.00	1453	1,330	2453	665	Petition to r	evive - uninte	entional			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665	Utility issue	fee (or reiss	ne)			
Extra Fee from Clalms below Fee Paid	1502	480	2502	240	Design issu	ie fee				
Total Claims 10 -20** = x = 0.00	1503	640	2503	320	Plant issue	fee				
Independent 2 -3** = x = 0.00	1460	130	1460	130	Petitions to	the Commiss	sioner			
Multiple Dependent =	1807	50	1807	50	Processing	fee under 37	CFR 1.17(q)			
Large Entity Small Entity	1806	180	1806	180	Submission	of Informatio	on Disclosure Stmt			
Fee Fee Fee Fee Fee Description	8021	40	8021	40			ssignment per			
Code (\$) Code (\$) Fee Besser Code Code	1809	770	2809	385	, , , , , ,		of properties) final rejection			
1201 86 2201 43 Independent claims in excess of 3					(37 CFR 1.		ntion to be			
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	examined (For each additional invention to be examined (37CFR 1.129(b))				
1204 86 2204 43 ** Reissue independent claims over original patent	1801	770	2801	385	-		examination (RCE)			
1205 18 2205 9 ** Reissue claims in excess of 20	1802	1802 900 1802 900 Request for expedited examination of a design application								
and over original patent	Other	Other fee (specify)								
SUBTOTAL (2) (\$) 0.00	*Red	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.00								
**or number previously paid, if greater; For Reissues, see above										
SUBMITTED BY ((Complete	(if applicable))			
Name (Print/Type) Morris Liss	Regist (Attorn	ration No ey/Agent)	24	,510		Telephone	(202) 331-7111			
Signature March Minds	1.				2	Date	November 26	2003		